



**GEORGIA DEPARTMENT OF BANKING AND
FINANCE**

**2990 Brandywine Road, Suite 200
Atlanta, Georgia 30341-5565
770-986-1633**

Broker/Lender Release of Fine Payment Status to Surety/Insuring Entity

In my official capacity as _____ of _____,

Title

Licensee Name

Department of Banking and Finance ("Department") License Number _____, I

hereby agree to the release of the payment status of fines assessed by the Department to the Surety or Insuring Entity on file with the Department. I understand that such disclosure by the Department shall be limited to whether the above referenced licensee has paid any fines assessed in full as of the date of request by the Surety or Insuring Entity. The Department shall be entitled to rely on a copy of the release signed by the licensee when releasing such information.

Print Name

Signature

Date